Parkside
RQIA ID: 1250
4 North Circular Road
Lisburn
BT28 3AH

Inspector: Cathy Wilkinson
Inspection ID: IN022433

Tel: 028 9267 4943
Email: paulene@parksidenursing.co.uk

Unannounced Medicines Management Inspection of Parkside

15 May 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced medicines management inspection took place on 15 May 2015 from 10:25 to 12:15.

Overall on the day of the inspection the management of medicines was found to be safe, effective and compassionate. The outcome of the inspection found no significant areas of concern though one area for improvement was identified and is set out in the quality improvement plan (QIP) within this report.

This inspection was underpinned by the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

Recommendations made as a result of this inspection relate to the DHSSPS Care Standards for Nursing Homes, April 2015. Recommendations made prior to April 2015 relate to DHSSPS Nursing Homes Minimum Standards, February 2008. RQIA will continue to monitor any recommendations made under the 2008 standards until compliance is achieved. Please also refer to sections 5.2 and 6.2 of this report.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the last medicines management inspection on 08 November 2012.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	1

The details of the QIP within this report were discussed with Ms Paulene Rogers as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person:	Registered Manager:
Parkside Private Care Ltd Mr Arthur Dodds	Ms Paulene Rogers
Person in Charge of the Home at the Time of Inspection: Ms Paulene Rogers	**Date Manager Registered:** 04 December 2008
Categories of Care: NH-I, NH-PH, NH-PH(E), NH-TI	**Number of Registered Places:** 29
Number of Patients Accommodated on Day of Inspection: 25	**Weekly Tariff at Time of Inspection:** £593 - £646

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the last medicines management inspection and to determine if the following standards and themes have been met:

Standard 28: Management of Medicines
Standard 29: Medicines Records
Standard 31: Controlled Drugs

Theme 1: Medicines prescribed on a “when required” basis for the management of distressed reactions are administered and managed appropriately.

Theme 2: Medicines prescribed for the management of pain are administered and managed appropriately.

4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to the inspection, the inspector reviewed the management of incidents reported to RQIA since the last medicines management inspection.

During the inspection the inspector met with the registered manager and staff on duty.

The following records were examined during the inspection:

Medicines requested and received
Personal medication records
Medicines administration records
Medicines disposed of or transferred
Controlled drug record book
Medicine audits
Policies and procedures
Care plans
Training records.

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an announced estates inspection dated 02 July 2014. The completed QIP was returned to the estates inspector. One of the issues included in the QIP related to improving the standard of décor to the doors in the premises. A programme of upgrading the doors was due to commence on 02 March 2015 and the registered manager was to confirm completion of this work. This confirmation has not yet been received.

5.2 Review of Requirements and Recommendations from the Last Medicines Management Inspection

Last Inspection Statutory Requirements		**Validation of Compliance**
Requirement 1 **Ref: Regulation 13(4)** **Stated once**	The registered manager must closely monitor the administration of those medicines highlighted at this inspection.	**Met**
	Action taken as confirmed during the inspection: There were no discrepancies in any audits completed during the inspection.	
Last Inspection Recommendations		**Validation of Compliance**
Recommendation 1 **Ref: Standard 37** **Stated once**	The registered manager should develop and implement Standard Operating Procedures for the management of controlled drugs.	**Met**
	Action taken as confirmed during the inspection: Standard Operating Procedures are now in place and have been read and signed by staff.	

Last Inspection Recommendations		Validation of Compliance
Recommendation 2 **Ref: Standard 38** **Stated once**	In the absence of the prescribers' signature two nurses should verify and sign all updates on the personal medication records.	**Not met**
	Action taken as confirmed during the inspection: The majority of personal medication records have been signed and verified by two nurses, however updates to the record have not been signed. This recommendation has been restated.	
Recommendation 3 **Ref: Standard 38** **Stated once**	The nursing staff should regularly review the records of administration which are maintained by care staff.	**Met**
	Action taken as confirmed during the inspection: Records of administration are now maintained by nursing staff.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

Medicines are being administered in accordance with the prescribers' instructions. The audit trails performed on a variety of randomly selected medicines produced satisfactory outcomes.

Systems are in place to manage the ordering of prescribed medicines to ensure adequate supplies are available and to prevent wastage.

Medicine records were legible and accurately maintained to ensure that there is a clear audit trail. The registered manager is in the process of computer generating the personal medication records.

Disposal of medicines no longer required is undertaken by trained and competent staff. Any discontinued or expired medicines are discarded by two registered nurses into the pharmaceutical clinical waste bin. Controlled drugs are denatured prior to disposal and this was evidenced in the controlled drug record book.

The receipt, administration and disposal of all controlled drugs subject to record keeping requirements are maintained in a controlled drug record book.

Stock balances of controlled drugs which are subject to safe custody requirements are reconciled on each occasion when the responsibility for safe custody is transferred.

Is Care Effective? (Quality of Management)

Written policies and procedures for the management of medicines are in place. There are up to date Standard Operating Procedures for the management of controlled drugs.

Suitable arrangements are in place to ensure that the management of medicines is undertaken by qualified, trained and competent staff and systems are in place to review staff competency in the management of medicines. A record is maintained of staff medicines management training and development activities. An annual capability and competency assessment is carried out on each registered nurse. A sample of records was provided for inspection.

There are arrangements in place to audit all aspects of the management of medicines. A medicines audit is carried out by the registered manager on a monthly basis and she advised that the findings, along with any actions required, are communicated to staff. Copies of these audits were available for inspection.

Is Care Compassionate? (Quality of Care)

A small number of patients are prescribed anxiolytic medicines on a "when required" basis for the management of distressed reactions, however none of the patients have required these medicines recently. This theme could not be fully examined.

Pain management medicines are prescribed as necessary and when administered their effect is monitored to ensure that they provide relief and that the patient is comfortable. The records of two patients who were prescribed medicines for the management of pain were reviewed. The names of the medicines and the parameters for administration had been recorded on the personal medication records. The administration had been recorded on the medication administration records (MARs). Care plans were in place which detailed the management of the patient's pain. The care plan is evaluated regularly. Pain assessments are completed regularly and held on file.

Areas for Improvement

The good practice of two registered nurses initialling handwritten entries on personal medication records, in the absence of the prescriber's signature, has not yet been implemented. The recommendation made previously has been restated.

Number of Requirements:	**0**	**Number of Recommendations**:	**1**

5.4 Additional Areas Examined

Medicines were safely and securely stored in accordance with the manufacturers' instructions.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Paulene Rogers, Registered Manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Person/Registered Manager

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to **pharmacists@rqia.org.uk** and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan	
Recommendations	
Recommendation 1 **Ref: Standard 38** **Stated: Second time** **To be Completed by: 15 June 2015**	In the absence of the prescribers' signature two nurses should verify and sign all updates on the personal medication records.
	Response by Registered Person(s) Detailing the Actions Taken: All Nurses have been instructed to verify and sign all updates on personal medication records and there must be two signatures in the absence of the prescribers signature

Registered Manager Completing QIP	Paulene Rogers	**Date Completed**	25.6.15
Registered Person Approving QIP	Mr A Dodds	**Date Approved**	25.6.15
RQIA Inspector Assessing Response	**Cathy Wilkinson**	**Date Approved**	**25/06/2015**

Please ensure the QIP is completed in full and returned to pharmacists@rqia.org.uk from the authorised email address